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09/823,390 Application No. TRANSMITTAL FORM Filing Date March 30, 200 (to be used for all correspondence after initial filing) First Named Inventor Tinku Acharya յՍԼ 0 2 2004 Art Unit 2124 David H. Malkeghnology Center 2100 **Examiner Name** 42390P11277 Total Number of Pages in This Submission Attorney Docket Number **ENCLOSURES** (check all that apply) After Allowance Communication to Group Fee Transmittal Form Drawing(s) Appeal Communication to Board of Appeals and Interferences Fee Attached Licensing-related Papers Appeal Communication to Group Petition Amendment / Response (Appeal Notice, Brief, Reply Brief) Petition to Convert a Provisional Application After Final Proprietary Information Affidavits/declaration(s) Power of Attorney, Revocation Change of Correspondence Address Status Letter Extension of Time Request Other Enclosure(s) Terminal Disclaimer (please identify below): **Express Abandonment Request** Request for Refund Check for \$420.00 Information Disclosure Statement - Return Receipt Postcard PTO/SB/08 CD, Number of CD(s) Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Remarks Basic Filing Fee Declaration/POA Response to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Paul A. Mendonsa, Reg. No. 42,879 Individual name ÁKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP Signature June 23, 2004 Date CERTIFICATE OF MAILING/TRANSMISSION I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. Typed or printed name Deborah L. Higham

June 23, 2004

Date

Signature

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FEE RANSMITTAL for FY 2004	Application Number	09/823,390 RECEIVE			
for FY 2004	Filing Date	March 30, 2001			
Effective 10/01/2004. Patent fees are subject to annual revision.	First Named Inventor	Tinku Acharya IIII 0 2 2004			
Applicant daims small entity status. See 37 CFR 1.27.	Examiner Name	David H. Malzahri			
	Art Unit				
TOTAL AMOUNT OF PAYMENT (\$) 420.00	Attorney Docket No.	2124 42390p11277Technology Center 2 00			

METHOD OF PAYMENT (check all that apply)	<u> </u>				E CALCULATION	ON (continue	ed)	
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Account Name Blakely, Sokoloff, Taylor & Zafman LLP	205	3 130	2053	130	Non-English specifica	tion		
The Commissioner is authorized to: (check all that apply)	1812	-	1812	2,520	For filing a request for		ation	
Charge fee(s) indicated below Credit any overpayments	1804	4 920°	1804	920 '	Requesting publication Examiner action	n of SIR prior to		
Charge any additional fee(s) or underpayment of fees as required under 37	1809	5 1,840°	1805	1,840	Requesting publication	n of SIR after		
CFR §§ 1.16, 1.17, 1.18 and 1.20. Charge fee(s) indicated below, except for the filling fee	,			• · · · =	Examiner action			
to the above-identified deposit account	125	1 110	2251	55	Extension for reply with	hin first month		
FEE CALCULATION	125	2 420	2252	210	Extension for reply with	hin second month		420.00
1. BASIC FILING FEE	1250	3 950	2253	475	Extension for reply with	hin third month		
Large Entity Small Entity	1254	4 1,480	2254	740	Extension for reply with	hin fourth month		
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1001 770 2001 385 Utuity fluing fee 1002 340 2002 170 Design filing fee	1402	2 330	2402	165	Filing a brief in suppor	t of an appeal		
1003 530 2003 265 Plant filing fee	1403	3 290	2403	145	Request for oral heari	ng		
1004 770 2004 385 Reissue filing fee	145	1 1,510	2451	1,510	Petition to institute a p		ing	
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2. EXTRA CLAIM FEES Extra Fee from	150		2502	240	Design issue fee			
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1202 18 2202 9 Claims in excess of 20		-			(37 CFR § 1.129(a))			
1201 86 2201 43 Independent claims in excess of 3	181	0 770	2810	385	For each additional invexamined (37 CFR § 1			
1203 290 2203 145 Multiple Dependent claim, if not paid	180	1 770	2801	385	Request for Continued		E)	
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**or number previously paid, if greater, For Reissues, see below	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 420.00							
SUBMITTED BY Complete (if applicable)								
Pagistration No.								
Name (Print/Type) Paul A. Mendonsa		(Attorney/Age	nt)		12,879	relephone	(310) 20	